

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Patent Application of) BOX: AF
Joseph B. PHIPPS) Group Art Unit: 3306
Application No.: 08/463,904) Examiner: M. Bockelman
Filed: June 5, 1995)
For: METHOD AND DEVICE FOR)
TRANSDERMAL ELECTROTRANS-)
PORT DELIVERY OF FENTANYL)
AND SUFENTANIL)

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AMENDMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

In response to the Official Action dated July 30, 1997, please amend the above-identified patent application as follows:

IN THE CLAIMS:

Amend claims 1, 9 and 10 as follows:

Sub C1. (Twice Amended) In a method of delivering an analgesic drug selected from the group consisting of fentanyl salts and sufentanil salts through a body surface by [electrotransport] iontophoresis from [an electrotransport] a delivery device having a donor reservoir containing an at least partially aqueous solution of a fentanyl salt or a sufentanil salt, the improvement comprising maintaining the concentration of the salt in solution above a level at which the [electrotransport] iontophoretic flux of the drug is dependent on the concentration of the drug salt in the solution, said level being above

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)
Joseph B. PHIPPS) **BOX AF**
Application No.: 08/463,904) Group Art Unit: 3306
Filed: June 5, 1995) Examiner: M. Bockelman
For: METHOD AND DEVICE FOR) **HAND-CARRY**
TRANSDERMAL ELECTROTRANSPORT)
DELIVERY OF FENTANYL AND)
SUFENTANIL)

RESPONSE TRANSMITTAL LETTER

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Enclosed is a response for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ Also enclosed is _____.
- ☐ _____ verified statement(s) claiming small entity status
☐ are also enclosed ☐ were submitted previously.
- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) is also enclosed.
- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below:

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AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	17	MINUS 20 =	0	x \$22 =	-0-
Independent Claims	2	MINUS 3 =	0	x \$80 =	-0-
If Amendment adds multiple dependent claims, add \$260.00					-0-
Total Amendment Fee					-0-
If small entity status is claimed, subtract 50% of Total Amendment Fee					-0-
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					-0-

☐ A claim fee in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in triplicate.

Respectfully submitted,

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Date: October 24, 1997